



Dry Cleaner Environmental Response Fund Program APPLICATION FORMS AND INSTRUCTIONS

These instructions supplement the application forms necessary for obtaining reimbursement from the Dry Cleaner Environmental Response Fund Program. The application process requires you to submit very detailed information about the eligible costs you incurred during your cleanup. Submitting a "complete" application ensures that your application will be processed as quickly as possible. The checklist below and the subsequent instructions will help you prepare a complete and successful reimbursement application.

Application Checklist

1. Talk with your DNR Remediation & Redevelopment regional project manager.

Feel free to ask questions if you don't know how to proceed or need clarification on such topics as program requirements, application procedures, eligible costs, or unusual circumstances.

2. Prepare your application.

Complete the following:

- ☐ Dry Cleaner Environmental Response Program Application, Form 4400-211
- ☐ Bid Proposals Summary, Form 4400-212 (for interim, site investigation, and remedial action costs)
- ☐ Reimbursement Cost Summary, Form 4400-213
- ☐ Reimbursement Cost Detail Worksheet Form 4400-214
- ☐ Verification of Taxpayer ID Number, Substitute W-9 Form

Include the following:

- ☐ A Site Map ☐ A Legal Description
- ☐ A copy of each accepted proposal (contract) for consulting and contract services, including documentation of any changes to the original contract and records of contract negotiations
- ☐ Detailed Invoices ☐ Canceled checks (copies of both sides) documenting payment of the invoices

Important:

Remember to code the detailed costs in your accepted service contract(s) and invoices to the eight standard cost categories described in the instructions on page 5.

Caution:

Be aware that there is a penalty for claiming ineligible costs on your reimbursement application. If you apply for reimbursement of an ineligible cost, the department may deduct 50% of the amount of that cost from your eligible reimbursement claim. Contact your DNR regional project manager prior to submitting your application if you are uncertain about the eligibility of any costs that you have incurred during your clean up. For more information, see Publication # RR-641: Reimbursement - Getting Your Money Back, at www.dnr.state.wi.us/org/aw/rr.

3. Forward your completed application and materials to your DNR region project manager.

Application deadlines are as follows (costs incurred prior to Oct 14, 1997 may no longer be submitted):

a. Costs from Oct. 14, 1997 to Jan. 31, 2000:

- * Costs for facilities closed before Sept 1, 1998 August 30, 2005
- * All other response action costs and facilities August 20, 2008

b. Costs from Feb. 1, 2000, and after:

- * Must be submitted within 120 days of completing the response action.
- * Costs for facilities closed before Sept 1, 1998 August 30, 2005
- * All other response action costs and facilities August 20, 2008



Dry Cleaner Environmental Response Fund Program Application (Form 4400-211) Instructions

To prevent a delay in processing your application, complete the entire application form and assemble any attachments required. Detailed instructions for the form's completion follow.

Applicant Information

1. Enter your name, business name, mailing address, and a telephone number where you can be reached during the workday. Enter a fax number and e-mail address if you have them.
2. Check the box that best describes what type of applicant you are.

"Operator" means:

1) a person who holds the dry cleaner license for a dry cleaning facility or 2) a subsidiary or parent corporation of the person specified in 1) above, or 3) a person who operated a dry cleaning facility that ceased operating before October 14, 1997.

"Owner" means:

A person who owns, or has possession or control of, and who receives or received direct or indirect consideration from the operation of a) a licensed dry cleaning facility or b) a facility that has ceased operation but that, if it ceased operation on or after October 14, was licensed before it ceased operation, or c) a subsidiary or parent corporation of the person specified in a) or b) above.

"Property owner of a licensed facility" means:

A person who owns the property on which is located a) a licensed dry cleaning facility or b) a facility that has ceased operation but was licensed before it ceased operation under the current property owner.

Application Type

Check the boxes that describe what type of application you are submitting. For definitions of immediate, site investigation, and remedial response actions see the publications entitled, *The Dry Cleaner Environmental Response Program* (RR #631) and *Complying with the Cleanup Requirements* (RR #633) found on the DNR web site www.dnr.state.wi.us/org/aw/rr.

Response Action Time Period

Enter the start date and end date for the response actions that you are requesting reimbursement for in this application. Remember to include all costs during the time period. **Important:** Costs incurred prior to the end date on the application will not be eligible for reimbursement in future applications.

Agent Information

An owner or operator may enter into a written agreement with another person under which that other person acts as an agent in conducting all remedial action activities. The owner or operator and the agent must jointly submit the application for reimbursement. If applicable, enter the agent's contact information.

Assignment Of Payment

An applicant may assign a reimbursement payment to a person who loans money to the applicant for the purpose of conducting cleanup activities. If applicable, enter the name, mailing address, and telephone number of the party to whom you would like the reimbursement to be paid. **Important:** the assignee must complete a Verification of Taxpayer Identification Number, Substitute W-9 form to receive a payment. Submit the form with your application.

Multiple Responsible Persons

Enter the names and contact information for any other owners or operators eligible for reimbursement from the program for discharges at this facility. If there are no other eligible persons to notify, check the box for that purpose.

Dry Cleaner Site Information

Enter the information requested about the dry cleaner site.

Discharge Information

Enter the information requested about the solvent discharge at the dry cleaner site.

Consultants

Enter the names of any consultants/contractors that you accepted service proposals from. You must complete a *Bid Proposals Summary*, form 4400-212, for each bidding process that you conducted beginning February 1, 2000. Also, submit a copy of each signed contract, including copies of any records of contract negotiations and signed amendments. The program has specific requirements for hiring a consultant that apply to all hiring processes for interim, site investigation, and remedial actions conducted beginning February 1, 2000, the effective date of the program's administrative rule, ch. NR 169, Wis. Adm. Code. Refer to ch. NR 169.21, Wis. Adm. Code, and the following publications for more information about consulting and contract services requirements: *The Dry Cleaner Environmental Response Program* (RR #661) and *Hiring a Consultant, What You Need to Know* (RR #635), found on the DNR web site at www.dnr.state.wi.us/org/aw/rr.

Insurance Information

Check the appropriate box that describes your insurance status and, depending on the box selected, enclose additional information if requested. At the time of your application for reimbursement, you are required to provide information about insurance policies that were in effect at the time of the discharge. Clean up costs covered by insurance are not eligible for reimbursement.

Other Sources Of Reimbursement

If you have applied for or are intending to apply to another program for reimbursement of costs associated with this discharge, provide the name of the program and your date of application.

Application Certification

Sign and date the application. No person may knowingly make or cause to be made a false or misleading statement in any document submitted to the department in connection with this program. The department shall deny an application if it is fraudulent or if the applicant falsified records related to this application.

Other Forms and Attachments

☐ **Bid Proposals Summary, Form 4400-212**

Summarize the bid proposals you received during the consultant selection process for interim response actions, site investigation, and remedial response action costs being submitted for reimbursement. Detailed instructions for filling out this form appear on the reverse side of the form itself. **Note:** You are not required to submit this form if you conducted your consultant selection process prior to February 1, 2000.

.....

☐ Reimbursement Cost Detail Worksheet (Form 4400-214) and Summary (4400-213)

Summarize the eligible costs from the paid invoices associated with your cleanup costs on these forms. Detailed instructions for filling out both forms appear on the reverse side of the forms. The forms should be submitted with copies of your paid invoices and both sides of the canceled checks documenting the payment of the invoices. See the instructions on page 4 on coding invoices and canceled checks to the standard cost categories.

☐ Taxpayer Identification Number Verification, Substitute W-9 form

The DNR must have your federal taxpayer identification number on file in order to issue a reimbursement payment to you. Complete this form to indicate your taxpayer identification number to us. Remember, if you do assign your payment to a person who loans money to you for the purpose of conducting cleanup activities, that person must complete this form. Note: Reimbursement payments may be considered reportable income. Contact your personal tax specialist for additional information.

☐ A Site Map (Submit only with the initial application related to a specific discharge.)

Submit a map indicating the facility's legal property boundaries including town, range, section and quarter-quarter section with your application.

☐ A Legal Description (Submit only with the initial application related to a specific discharge.) Submit a legal description of the land parcel where the facility is located which corresponds to the most recent accurate parcel description filed with the register of deeds in the county where the land parcel is located.

☐ Accepted Service Contracts

Submit a copy of each bid proposal you accepted for consulting and contract services, including records of any contract negotiations. Code the bid proposals to the standard cost categories described on page 5 to link them to your invoices and cost detail worksheet and summary forms.

☐ Detailed Invoices

1. Submit all of the invoices for each eligible cost that you are submitting for reimbursement. Invoices should contain a detailed explanation of the work performed. They should identify the nature of the services or materials provided, the amount charged for the services or materials, the identity of the provider, and the dates on which the services or materials were provided. If an invoice from your contractor does not provide a detailed explanation, you must attach an explanation to the invoice. If an invoice identifies subcontractor costs, include a copy of the subcontractor's invoice.
2. Code each line item on every invoice to the standard cost categories described under the coding instructions below. You may allocate costs from one invoice or invoice item into two or more cost categories by indicating the percentage (or dollar amount) attributable to each cost category that applies. Costs not eligible for reimbursement should not be coded.
3. Attach proof of payment (copies of both sides of canceled checks) to each invoice you are submitting.

Important: Include all the invoices that you have paid prior to the date you are submitting your application. Costs incurred prior to the date of your application will not be reimbursed if submitted in the future. This includes costs incurred by any other eligible responsible person.

☐ **Coding Your Expenditure Documentation to the Standard Cost Categories**

Code your accepted service contracts and invoices to the following cost categories by noting the letter code representing the category next to the contract line item costs and invoice line items:

Cost Category **A** - Soil Investigation Costs

Cost Category **B** - Soil Remediation Costs

Cost Category **C** - Groundwater Investigation

Cost Category **D** - Groundwater Remediation Costs

Cost Category **E** - Air/Vapor Investigation Costs

Cost Category **F** - Air/Vapor Remediation Costs

Costs Category **G** - Laboratory and Other Analysis

Cost Category **H** - Miscellaneous Costs

This will link your documentation to the cost detail worksheet and summary forms that you complete and enable the department to efficiently audit your reimbursement application.

☐ **Penalties for Claiming Ineligible Costs**

There is a penalty for claiming ineligible costs on your reimbursement application. There is a statutory provision that states that if any person applies for reimbursement of an ineligible cost, the department may deduct 50% of the amount of that cost from that person's eligible reimbursement claim. Contact your DNR region Remediation and Redevelopment project manager prior to submitting your application if you are uncertain about the eligibility of any costs that you have incurred during your clean up.

☐ **Multiple Contaminants**

If your site cleanup costs include products other than dry cleaner chemicals attach an explanation of how the costs are separated with your application. Site cleanup costs associated with products other than dry cleaner chemicals are not reimbursable through this fund. **Note:** With the exception of past costs, the determination of how non-dry cleaner chemical costs are segregated should be made with the DNR project manager when the workplan is developed for the site.

☐ **Subsequent Applications for Remedial Action Costs**

For remedial action reimbursements, an owner or operator may submit up to two applications per year, not including the final application. An owner or operator may submit an application for immediate actions, interim actions or site investigation reimbursement all within the same fiscal year (July 1 through June 30).

Disclaimer: *This document may contain some information about certain state statutes and rules but does not necessarily include all of the details found in the statutes/rules. Readers should consult the actual language of the statutes/rules to answer specific questions.*

Equal Opportunity Statement

The Wisconsin Department of Natural Resources provides equal opportunity in its employment, programs, services, and functions under an Affirmative Action Plan. If you have any questions, please write to Equal Opportunity Office, Department of Interior, Washington, D.C. 20240

Accessibility Statement

This publication is available in alternative format upon request. Please call 608-267-3543 for more information.



Printed on
Recycled
Paper